FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED -

2013 JAN 11 AM 9: 54

						F	ECMAIL (CENTER
1. NAME OF COMMITTEE (in	full)		(Check if name is changed)	Example:If over the lin	typing, type es.	12FE4M		
Friends of	David	Sch	weikert					
						<u> </u>		
ADDRESS (number and street)		228 S	Washington Street				<u>i I I I I : </u>	
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				CITY		STATE	· ZIP C	ODE
COMMITTEE'S E-MA	IL ADDRES	S (Pleas	se provide only one	e-mail address)				
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4. IS THIS STATEM	MENT A	NEV	W (N) OR	An	MENDED (A)			
I certify that I have e	xamined thi	s Stater	ment and to the be	est of my knowled	ge and belief it	is true, correc	t and complete.	
Type or Print Name of	of Treasurer	Julia (C Miller			<u> </u>		
	-Julia C i	Miller	a. L. Ni	1.01		ΓX	M · Fred	Y Y Y Y Y
Signature of Treasure	r		Jun 10	$\frac{\omega}{\omega}$.	ga agram a fear ann ann ann ann an aire agus ann ann ann ann ann ann ann ann ann an	Date U	1 1 0	2.0.1.3
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NOTE: Submission of f			-				•	2 U.S.C. §437g.
		INY CHA	ANGE IN INFORMA	TION SHOULD BE	REPORTED W	ITHIN 10 DAYS	i. _ 	
Office					her information co		FEC FC	DRM 1
Use					800-424-9530		(Revised (